

UNITED STATES DISTRICT COURT
DISTRICT OF MINNESOTA

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DEC 03 2018

CLERK, U.S. DISTRICT COURT
ST. PAUL, MN

Michael Rogan

Plaintiff(s),

(Enter the full name(s) of ALL plaintiff(s)
and prisoner number(s) in this action.)

vs.

Case No. 18-3318 PJS/LIB
(To be assigned by Clerk of District Court)

City of Richfield, Richfield
Police Department and unknown/
unnamed Police Officers

DEMAND FOR JURY TRIAL

YES X NO

Defendant(s).

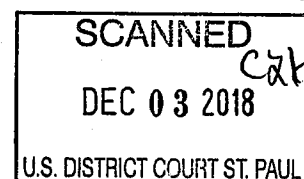
(Enter the full name(s) of ALL defendants in
this action. Please attach additional sheets
if necessary).

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS UNDER
42 U.S.C. § 1983

I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved

NO



in this action or otherwise relating to your imprisonment in the last three years?

☐ Yes

☒ No

B. If you answer to (a) is "yes", describe each lawsuit in the space below.

1. Parties to the previous lawsuit:

Plaintiffs:

Defendants:

2. Court (If federal court, name the district. If state court, name the state and county.):

3. Case Number:

4. Name of judge assigned to the case:

5. Cause of action (Cite the statute under which you filed and write a brief statement of the case):

6. Disposition or final determination of the case (for example, dismissed or appealed).

7. Approximate date of filing the lawsuit:

8. Approximate date of disposition or final determination of the lawsuit:

Attach a copy of the disposition or final determination of the lawsuit if it was filed in a court other than the U.S. District Court for the District of Minnesota.

If there was more than one lawsuit, describe the additional lawsuits on a separate sheet of paper answering the same questions in the same order as above in Question 1(b). Label this information as Question 1(b).

Check here if additional sheets of paper are attached. ☐

II. PRESENT PLACE OF CONFINEMENT

A. Is there a prisoner grievance procedure in the institution?

☐ Yes

☐ No

B. Did you present the facts relating to your complaint in the prisoner grievance procedure?

☐ Yes

☐ No

C. If you answered "yes" to question II.B.:

1. What steps did you take:

2. What was the result?

Attach a copy of the decision or disposition received from the prisoner grievance procedure.

D. If you answered "no" to question II.B., explain why you did not present the facts relating to your complaint in a prisoner grievance procedure.

III. PARTIES

List your name, prisoner number, address and telephone number. Do the same for any additional plaintiffs. Attach an additional sheet of paper, if necessary.

A. Name of Plaintiff:

Prisoner Number

Address

Additional Plaintiffs:

Provide each defendant's full name, official position, and place of employment. Attach additional sheets of paper, if necessary.

B. Name:

Official Position:

Employer's Address:

Additional Defendants:

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES AND ADDRESSES ON A SEPARATE SHEET OF PAPER.

Check here if additional sheets of paper are attached: ☒

Please label the attached sheets of paper as II.A. for Plaintiffs and II.B. for Defendants.

IV. STATEMENT OF THE CLAIM

Describe in the space provided below the basic facts of your claim. Describe how each individual defendant is personally involved, including dates, places and specific wrongful acts or omissions by each defendant. Each factual allegation should be provided in separately lettered paragraphs, beginning with letter A. Do not make any legal arguments or cite any cases or statutes.

A. ON November 22 2012 The Richfield Police Department Police Officers Arrived at MY Residence at around 10:30 PM with a ~~Search~~ Warrant Search

2. I heard a loud knock on my door. I Opened the door and ~~Layed~~ ^{Layed} down. Officers entered MY Residence

and a unknown / unnamed officer dropped his knee into my neck. Unknown / unnamed officers got me up of my bed grabbed a chair and attempted to run it under me missing causing two broken ribs.

Excessive Force

Richfield Police Department Police officers used Excessive force with chair causing two broken Ribs.

I seek damages in Excess of \$ 75,000 for Pain and suffering.

Attach additional sheets of paper as necessary.

Check here if additional sheets of paper are attached: ☐

Please label the attached sheets of paper to as Additional Facts and continue to letter the paragraphs consecutively.

V. REQUEST FOR RELIEF

State briefly exactly what you want the Court to do for you. Do not make any legal arguments or cite any cases or statutes.

Award me damages in excess of \$ 75,000 for pain and suffering.

I (We) hereby certify under penalty of perjury that the above complaint is true to the best of my (our) information, knowledge, and belief.

Signed this November day of 18th, 20 18

Signature(s) of Plaintiff(s)

Michael Rogan

11-18-18

Michael Rosen 11-18-18

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide his/her mailing address and telephone number. Attach additional sheets of paper as necessary.